

JAN 24 2007

**FAX TRANSMISSION****DATE:** January 24, 2007**PTO IDENTIFIER:** Application Number 09/937,344  
Patent Number**Inventor:** Egon SCHULZ**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** MORRISON & FOERSTER LLP

Kevin R. Spivak

**PHONE:** (703) 760-7762**Attorney Dkt. #:** 449122010700**PAGES (Including Cover Sheet):** 11**CONTENTS:**  
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PTO/SB/97 (09-04)  
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Application No. (if known): 09/937,344

Attorney Docket No.: 449122010700

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va-190748

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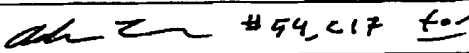
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|  |                        |                   |
|--|------------------------|-------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | Application Number     | 09/937,344        |
|  | Filing Date            | February 14, 2002 |
|  | First Named Inventor   | Egon SCHULZ       |
|  | Art Unit               | 2617              |
|  | Examiner Name          | B. J. Miller      |
| Total Number of Pages in This Submission   | Attorney Docket Number | 449122010700      |

| ENCLOSURES (Check all that apply)  |  |  |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Pre-Appeal Brief and Transmittal |
| Remarks  |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT   |  |  |
| Firm Name  | MORRISON & FOERSTER LLP  |  |
| Signature  |   |  |
| Printed name   | Kevin R. Spivak  |  |
| Date   | January 24, 2007   | Reg. No. 43,148  |

va-190726

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PTO/SB/17 (01-06)

Approved for use through 7/31/2008. OMB 0851-0032

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|  |  |                          |                   |
|--|--|--------------------------|-------------------|
| <b>FEE TRANSMITTAL</b><br><b>For FY 2006</b>                                   |  | <b>Complete if Known</b> |                   |
|  |  | Application Number       | 09/937,344        |
|  |  | Filing Date              | February 14, 2002 |
|  |  | First Named Inventor     | Egon SCHULZ       |
|  |  | Examiner Name            | B. J. Miller      |
|  |  | Art Unit                 | 2617              |
|  |  | Attorney Docket No.      | 449122010700      |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  |                          |                   |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1,520.00                                   |  |                          |                   |

**METHOD OF PAYMENT (check all that apply)**

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account    Deposit Account Number: 03-1952    Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17    ☐ Credit any overpayments

**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |              |  |             |                       |                           |                       |                       |  |
|---|--------------|--|-------------|-----------------------|---------------------------|-----------------------|-----------------------|--|
| Application Type  | FILING FEES  |  | SEARCH FEES |                       | EXAMINATION FEES          |                       | Fees Paid (\$)        |  |
|   | Fee (\$)     | Small Entity Fee (\$)                            | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)                  | Small Entity Fee (\$) |                       |  |
| Utility   | 300          | 150  | 500         | 250                   | 200                       | 100                   |                       |  |
| Design  | 200          | 100  | 100         | 50                    | 130                       | 65                    |                       |  |
| Plant   | 200          | 100  | 300         | 150                   | 160                       | 80                    |                       |  |
| Reissue   | 300          | 150  | 500         | 250                   | 600                       | 300                   |                       |  |
| Provisional   | 200          | 100  | 0           | 0                     | 0                         | 0                     |                       |  |
| 2. EXCESS CLAIM FEES  |              |  |             |                       |                           |                       |                       |  |
| Fee Description   |              |  |             |                       |                           |                       | Small Entity Fee (\$) |  |
| Each claim over 20 (including Reissues)   |              |  |             |                       |                           |                       | 50                    |  |
| Each independent claim over 3 (including Reissues)  |              |  |             |                       |                           |                       | 200                   |  |
| Multiple dependent claims   |              |  |             |                       |                           |                       | 360                   |  |
| Total Claims  |              | Extra Claims                                     | Fee (\$)    | Fee Paid (\$)         | Multiple Dependent Claims |                       |                       |  |
|   |              |  |             |                       | Fee (\$)                  |                       | Fee Paid (\$)         |  |
| HP = highest number of total claims paid for, if greater than 20.   |              |  |             |                       |                           |                       |                       |  |
| Indep. Claims   |              | Extra Claims                                     | Fee (\$)    | Fee Paid (\$)         |                           |                       |                       |  |
|   |              |  |             |                       |                           |                       |                       |  |
| HP = highest number of independent claims paid for, if greater than 3.  |              |  |             |                       |                           |                       |                       |  |
| 3. APPLICATION SIZE FEE   |              |  |             |                       |                           |                       |                       |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |  |             |                       |                           |                       |                       |  |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)    | Fee Paid (\$)         |                           |                       |                       |  |
| - 100 =   | /50          | (round up to a whole number) x                   |             |                       |                           |                       |                       |  |
| 4. OTHER FEE(S)   |              |  |             |                       |                           |                       |                       |  |
| Non-English Specification, \$130 fee (no small entity discount)   |              |  |             |                       |                           |                       |                       |  |
| Other (e.g., late filing surcharge): 1401 Notice of appeal  |              |  |             |                       |                           |                       | 500.00                |  |
| 1253 Extension for response within third month  |              |  |             |                       |                           |                       | 1,020.00              |  |

|                   |                        |                                   |                  |
|-------------------|------------------------|-----------------------------------|------------------|
| SUBMITTED BY      |                        |                                   |                  |
| Signature         | <u>Kevin R. Spivak</u> | Registration No. (Attorney/Agent) | 43,148           |
| Name (Print/Type) | Kevin R. Spivak        | Telephone                         | (703) 760-7762   |
|                   |                        | Date                              | January 24, 2007 |

va-190729